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Image# 15951161320

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Authorize	ed Committee	Offic	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Starner Jones for Co	ongress			
ADDRESS (number and street)	PO Box 297			
Check if different than previously reported. (ACC)	Pontotoc		MS 38863	3
2. FEC IDENTIFICATION	NUMBER ▼	CITY	STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00574269	3. IS	THIS X NEW (N) OR	AMENDED (A)	MS 01
4. TYPE OF REPORT ((a) Quarterly Reports: April 15 Quarter	(b) 12-	Day PRE -Election Report for the Primary (12P) Convention (12C)	: General (12G) Special (12S)	Runoff (12R)
July 15 Quarterl October 15 Qua		ection on	/ Y " Y " Y " Y	in the State of
January 31 Year	-End Report (YE) (c) 30-	Day POST -Election Report for the	ne:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Rep	, ,	ection on	/ Y " Y " Y " Y	in the State of
5. Covering Period	01		M / D D / Y 31	y y y y 2015
I certify that I have examined Type or Print Name of Treasu		of my knowledge and belief it is	true, correct and con	nplete.
Signature of Treasurer	Paul Kilgore	[Electronically Filed]	Date 04	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, en	roneous, or incomplete informa	ation may subject the person signing	ng this Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only				EC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 20

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Starner	Jones	for	Congress
---------	-------	-----	----------

01 03 31 2015 01 2015 Report Covering the Period: From: To: **COLUMN B COLUMN A Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 27751.00 27751.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 27751.00 27751.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 84413.14 84413.14 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 84413.14 84413.14 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 143337.86 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 200000.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

PAGE 3 / 20

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Starner Jones for	Congress
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	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	12500.00	12500.00		
	(ii) Unitemized	201.00	201.00		
	(iii) TOTAL of contributions from individuals	12701.00	12701.00		
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	15050.00	15050.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	27751.00	27751.00		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	200000.00	200000.00		
	(b) All Other Loans	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	200000.00	200000.00		
	OFFSETS TO OPERATING EXPENDITURES				
	(Refunds, Rebates, etc.)	0.00	0.00		
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	227751.00	227751.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 20

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	84413.14	84413.14
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed		
	by the Candidate	0.00	0.00
	(b) Of All Other Loans(c) TOTAL LOAN REPAYMENTS	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	84413.14	84413.14
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	227751.00
25.	SUBTOTAL (add Line 23 and Line 24)		227751.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	84413.14
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)		143337.86

SCHEDULE A (FEC Form 3)

20 FOR LINE NUMBER: **PAGE** 5 OF (check only one) 11a 11b 11c Detailed Summary Page 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Starner Jones for Congress Full Name (Last, First, Middle Initial) Patrick Bufkin Date of Receipt Mailing Address 106 Granberry Way 2015 21 City State Zip Code Transaction ID: SA11AI.4224 MS 39110 Madison FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Self Employed Physician Receipt For: 2015 Election Cycle-to-Date Primary General 500.00 Other (specify) Special-General Full Name (Last, First, Middle Initial) John Chang Date of Receipt Mailing Address 1 Castle Dr 18 2015 City State Zip Code Transaction ID: SA11AI.4128 Wilmington MA 01887 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Physician Self Employed Receipt For: 2015 Election Cycle-to-Date Primary General 500.00 Other (specify) Special-General Full Name (Last, First, Middle Initial) Ken Clowers Date of Receipt Mailing Address 5255 Hwy 9 N 2015 30 City State Zip Code Transaction ID: SA11AI.4169 MS 38863 Pontotoc FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 400.00 Name of Employer Occupation Self Employed Pharmacy Receipt For: 2015 Election Cycle-to-Date Primary General 400.00 Other (specify) Special-General 1400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page (check only o

FOR LINE NUMBER: [PAGE	:	ь	OF		20			
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Any information copied from such Reports and or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full) Starner Jones for Congress												
Full Name (Last, First, Middle Initial) Roger Criner							late of	f Receip	nt.			
Mailing Address 10207 Shrewsbury Run West							03		20 /)15	1
City Collierville	State TN	Ž	Zip Code 38017			Tra	nsacti	ion ID :	SA11AI.			
FEC ID number of contributing federal political committee.	С						Amount	t of Eac	ch Receip	t this F	-	0
Name of Employer Self Employed	Occupation Physician	n				7 I					250.0	0
Receipt For: 2015 Primary General Other (specify) Special-General	Election C	Sycle-to	o-Date	2	50.00							
Full Name (Last, First, Middle Initial) Joel R Epperson Jr							Date of	f Receip	ot			
Mailing Address 4208 Jada Cove	OL :		7: 0				M M M	/ D	10		015	
City Jonesboro	State AR		Zip Code 72404			Tra	nsacti	ion ID :	SA11AI.4	1175		
FEC ID number of contributing federal political committee.	С					A	Amount	t of Eac	ch Receip	ot this F	-	0
Name of Employer Self Employed	Occupation Physician	n				1				7	2700.0	U
Receipt For: 2015 Primary General Other (specify) Special-General	Election C	Sycle-to	o-Date	270	00.00							
Full Name (Last, First, Middle Initial) John Fleenor							Date of	f Receip	ot			
Mailing Address 3078 Brntwood Run Dr						1	м и м	/ D			015	1
City Collierville	State TN		Zip Code 38017			Tra		ion ID :	SA11AI.			_
FEC ID number of contributing federal political committee.	С						Amount	t of Eac	ch Receip	ot this F	Period	
Name of Employer Information Requested	Occupation Information	n Requ						,	-		250.0	0
Receipt For: 2015 Primary General Other (specify) Special-General	Election C	ycle-t	o-Date	2	50.00							
SUBTOTAL of Receipts This Page (optional)								-,			3200.00	
TOTAL This Period (last page this line number	only)											

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 7 OF 20 (check only one) 11a 11b 11c Detailed Summary Page 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Starner Jones for Congress Full Name (Last, First, Middle Initial) **Brent Harrison** Date of Receipt Mailing Address 108 Cove Ln 2015 10 City State Zip Code Transaction ID: SA11AI.4173 MS 39110 Madison FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2700.00 Name of Employer Occupation None Retired Receipt For: 2015 Election Cycle-to-Date Primary General 2700.00 Other (specify) Special-General Full Name (Last, First, Middle Initial) Mary Harrison Date of Receipt Mailing Address 108 Cove Ln 10 2015 Citv State Zip Code Transaction ID: SA11AI.4177 Madison MS 39110 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation None Homemaker Receipt For: 2015 Election Cycle-to-Date Primary General 2700.00 Other (specify) Special-General Full Name (Last, First, Middle Initial) Carl Wayne Mahon Date of Receipt Mailing Address PO Box 41 2015 10 City Zip Code State Transaction ID: SA11AI.4171 MS 38863 Pontotoc FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Self Employed Businessman Receipt For: 2015 Election Cycle-to-Date Primary General 1000.00 Other (specify) Special-General 6400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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	y information copied from such Reports and S for commercial purposes, other than using the			
\rangle	NAME OF COMMITTEE (In Full) Starner Jones for Congress			
\ -	Full Name (Last, First, Middle Initial) William Regan Mailing Address 5898 Brierhedge Avenue City Memphis FEC ID number of contributing federal political committee. Name of Employer None Receipt For: 2015 Primary General Other (specify) Special-General	State Zip 0 TN 381 C Occupation Retired Election Cycle-to-Date	20	Date of Receipt 03 30 2015 Transaction ID : SA11AI.4167 Amount of Each Receipt this Period
3.	Full Name (Last, First, Middle Initial) Sandra Rich Mailing Address 8401 J R Manor Dr #100 City Tampa FEC ID number of contributing federal political committee. Name of Employer Epperson & Rich Receipt For: 2015 Primary Other (specify) Special-General	State Zip C FL 336 C Occupation Attorney Election Cycle-to-Da	34	Date of Receipt M M M / 21 / 2015 Transaction ID : SA11AI.4226 Amount of Each Receipt this Period 250.00
) .	Full Name (Last, First, Middle Initial) Jeremy Wade Mailing Address 136 Walter Lott Rd City Seminary FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: 2015 Primary General Other (specify) Special-General	State Zip G MS 394 C Occupation Information Requeste Election Cycle-to-Da	79 ed	Date of Receipt M M M / 20 2015 Transaction ID: SA11AI.4132 Amount of Each Receipt this Period 250.00
	UBTOTAL of Receipts This Page (optional)			1500.00 12500.00
- 1	OTAL This Period (last page this line number of	ı ııy)		

36	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 20 (check only one)			
Τ	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c X 11d 12 13a 13b 14 15			
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements mand a	ay not be sold or used by any paddress of any political committe	erson for the purpose of soliciting contributions			
\rangle	NAME OF COMMITTEE (In Full) Starner Jones for Congress						
	Full Name (Last, First, Middle Initial) Starner Jones			Date of Receipt			
۱.	Mailing Address 136 North Brooks Street			03 03 2015			
	City Pontotoc	State MS	Zip Code 38863	Transaction ID : SA11D.4187			
	FEC ID number of contributing federal political committee.	С ны	MS01198	Amount of Each Receipt this Period			
	Self Employed Pr	ccupation hysician		50.00			
	Receipt For: 2015 Primary General Other (specify) Special-General	lection Cy	/cle-to-Date 50.00				
	Full Name (Last, First, Middle Initial) Starner Jones			Date of Receipt			
, .	Mailing Address 136 North Brooks Street	03 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City Pontotoc	State MS	Zip Code 38863	Transaction ID : SA11D.4191			
	FEC ID number of contributing federal political committee.	С неи	MS01198	Amount of Each Receipt this Period			
		ccupation		In-kind - Signature Gathering			
			/cle-to-Date 10050.00				
	Full Name (Last, First, Middle Initial) Starner Jones			Date of Receipt			
).	Mailing Address 136 North Brooks Street			03 18 2015			
	City Pontotoc	State MS	Zip Code 38863	Transaction ID : SA11D.4100			
	FEC ID number of contributing federal political committee.	С нег	MS01198	Amount of Each Receipt this Period			
		ccupation hysician	l	In-kind - Staff Salary			
	Receipt For: 2015 El	lection Cy	/cle-to-Date				
	Other (specify) Special-General		13300.00				
s	UBTOTAL of Receipts This Page (optional)			13300.00			
	3- (-)			, , , , , , , , , , , , , , , , , , , ,			

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER:	PAGE 10 OF 20									
Use separate schedule(s)	(check only one)										
for each category of the Detailed Summary Page	11a 11b	11c X 11d									
Detailed Summary Page	12 13a	13b 14 15									
y not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.											

•			Detailed Sum	mary Page	12	13a	13b	14	15
	ly information copied from such Reports and St for commercial purposes, other than using the					purpose of	soliciting	contribut	tions
\rangle	NAME OF COMMITTEE (In Full) Starner Jones for Congress								
	Full Name (Last, First, Middle Initial) Starner Jones								
Α.	Mailing Address 136 North Brooks Street	Date of Receipt							
	City	State	Zip Code		03	18	20	015	_
	Pontotoc	MS	38863		Transacti	on ID : SA1	1D.4102		
	FEC ID number of contributing federal political committee.	С нег	MS01198		Amount	of Each Re	ceipt this I	-	
	Name of Employer	Occupation	1				-	1750.00)
	Self Employed	Physician			In-kind -	Staff Salary			
	Receipt For: 2015 Primary General	Election Cy	/cle-to-Date						
	Other (specify) Special-General		, ,	15050.00					
	Full Name (Last, First, Middle Initial)				Doto of	Daggint			
В.	Mailing Address				Date of	Receipt /	/ Y T Y	I Y I Y	1
	City	State	Zip Code						
	FEC ID number of contributing federal political committee.	С			Amount	Period	-		
	Name of Employer	Occupation	l			-			
	Receipt For: Primary General Other (specify)	Election Cy	ycle-to-Date						
	Full Name (Last, First, Middle Initial)								
C.	Mailing Address				Date of	Receipt			
	Mailing Address				M M	/ D D	/ Y Y	YY	1
	City	State	Zip Code						_
	FEC ID number of contributing federal political committee.	С			Amount	of Each Re	ceipt this	Period	_
	Name of Employer	Occupation	l		L.		-		
	Receipt For: Primary General Other (specify)	Election Cy	/cle-to-Date						
s	UBTOTAL of Receipts This Page (optional)							1750.00)
т	OTAL This Period (last page this line number o	nly)					1	15050.00)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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for each category of the		11a		11b	11c		11d	
Detailed Summary Page		12	X	13a	13b		14	15

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	ny information copied from such Reports and St for commercial purposes, other than using the		
\rangle	NAME OF COMMITTEE (In Full) Starner Jones for Congress		
۱.	Full Name (Last, First, Middle Initial) Starner Jones Mailing Address 136 North Brooks Street		Date of Receipt 03 20 2015
	City Pontotoc	State Zip Code MS 38863	Transaction ID : SA13A.4179
	FEC ID number of contributing federal political committee.	С н6мS01198	Amount of Each Receipt this Period
	Name of Employer Self Employed Receipt For: 2015	Occupation Physician Floation Circle to Date	Personal Funds
	Primary General Other (specify) Special-General	Election Cycle-to-Date 215050.00	
3.	Full Name (Last, First, Middle Initial)		Date of Receipt
•	Mailing Address	7.0.4	M M / D D / Y Y Y Y
	City	State Zip Code	_
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	_
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
<u> </u>	Full Name (Last, First, Middle Initial)		Date of Receipt
-	Mailing Address City	State Zip Code	M M M / D D / Y Y Y Y
		_	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
S	SUBTOTAL of Receipts This Page (optional)		200000.00
т	OTAL This Period (last page this line number o	anly)	200000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use separate sc for each categor Detailed Summa	y of the	FOR LINE NUMBER: (check only one) X 17
					person for the purpose of soliciting contributions are to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Starner Jones for Congress				
Α.	Full Name (Last, First, Middle Initial) 3dt, LLC				Date of Disbursement
	Mailing Address 198 Hand Drive				03 24 2015
	City Flowood	State MS	Zip Code 39232		Amount of Each Disbursement this Period
	Purpose of Disbursement Printing				675.00 Transaction ID : SB17.4147
	Candidate Name			Category/ Type	
	Office Sought: House Senate President State: District:	Disbursement For Primary Other (s	General		
В.	Full Name (Last, First, Middle Initial) Addison Hall Design Mailing Address 506 Grant's Ferry Rd				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State MS	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Graphic Design	IVIS	39047		1554.84 Transaction ID : SB17.4149
	Candidate Name			Category/ Type	
	Senate President	Disbursement For Primary Other (s	General		
	State: District: Full Name (Last, First, Middle Initial)				
C.	Austin Chambers				Date of Disbursement
	Mailing Address 818 6th Street NE				03 30 2015
	City Washington		p Code 20002		Amount of Each Disbursement this Period
	Purpose of Disbursement Strategy Consulting				6000.00
	Candidate Name			Category/ Type	Transaction ID : SB17.4108
	Office Sought: House Senate President	Disbursement For Primary Other (s	General		
_	State: District:				
s	SUBTOTAL of Disbursements This Page (or	otional)			8229.84

TOTAL This Period (last page this line number only).....

ım	nage# 15951161332					
		(FEC Form BURSEMENT	•	Use separate sc for each categor Detailed Summa	y of the	FOR LINE NUMBER: (check only one) X 17
						person for the purpose of soliciting contributions be to solicit contributions from such committee.
$\frac{\Im}{2}$	NAME OF COMMI			addition of any por		
۸.	Full Name (Last, Find Austin Cham					Date of Disbursement
	Mailing Address 8	18 6th Street NE				03 30 2015
	City Washington		State DC	Zip Code 20002		Amount of Each Disbursement this Period
	Purpose of Disburs See Below	sement			Cotonomi	749.16 Transaction ID : SB17.4110
	Office Sought:	House	Disbursement For	:	Category/ Type	
		Senate President	Primary Other (s	General pecify)		
	State: Full Name (Last, Fi	District: irst. Middle Initial)				
3.	Austin Cham Mailing Address 8	bers				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Washington		State DC	Zip Code 20002		Amount of Each Disbursement this Period
	Purpose of Disburs Reimbursment for	sement Mileage				463.65 Transaction ID : SB17.4110.0
	Candidate Name				Category/ Type	[MEMO ITEM]
	Office Sought: State:	House Senate President District:	Disbursement Form Primary Other (s	General		
	Full Name (Last, Fi					
Э.	Ryan Bonifay	•				Date of Disbursement
		464 Timberfield Circl				03 30 2015
	City Pfafftown Purpose of Disburs	sement		7040	T	Amount of Each Disbursement this Period 3000.00
	Field Consulting Candidate Name				Category/ Type	Transaction ID : SB17.4111
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

City Memphis Durpose of Disbursement Office Supplies Candidate Name Office Sought: Disbursement For: Senate President Disbursement For: Senate Primary Other (specify) B. Crye-Leike Mailing Address 8 S 3rd St #101 City State: Disbursement For: Senate Primary General Other (specify) Date of Disburse Amount of Each Amount of Each Transaction ID: S Date of Disburse Amount of Each Other (specify) Date of Disburse Amount of Each Other (specify) Date of Disburse Transaction ID: S Date of Disburse Transaction ID: S	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of for commercial purposes, other than using the name and address of any political committee to solicit contribution. NAME OF COMMITTEE (in Full) Starner Jones for Congress Full Name (Last, First, Middle Initial) A. Costco Mailing Address 2431 N Germantown Pkwy City Memphis Purpose of Disbursement Office Supplies Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) B. Crye-Leike Mailing Address 8 S 3rd St #101 City State Zip Code TN 38018 President Other (specify) Date of Disbursement For: Other (specify) Amount of Each Transaction ID: S Transaction ID: S Transaction ID: S Transaction ID: S And The Transaction ID: S Transaction ID: S Date of Disbursement Rent Category/ Type Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Category/ Type Office Sought: President State: District: Full Name (Last, First, Middle Initial) C. Starner Jones Mailing Address Mailing Address 136 North Brooks Street City State Zip Code Amount of Each	18 19a 19l
NAME OF COMMITTEE (In Full) Starner Jones for Congress Full Name (Last, First, Middle Initial) A. Costco Mailing Address 2431 N Germantown Pkwy City State Zip Code Memphis TN 38018 Purpose of Disbursement Office Sought: Senate Primary General Primary General Other (specify) B. Crye-Leike Mailing Address 8 S 3rd St #101 City State Zip Code TN 38103 Purpose of Disbursement For: Gategory/ Type Office Sought: Senate Primary General Other (specify) State: District: TN 38103 Purpose of Disbursement Rent Candidate Name Office Sought: House Disbursement For: Gategory/ Type Office Sought: Primary General TN 38103 Purpose of Disbursement Rent Candidate Name Office Sought: House Disbursement For: Gategory/ Type Office Sought: Primary General Primary General Disbursement For: Primary General District: Full Name (Last, First, Middle Initial) C. Starner Jones Mailing Address 136 North Brooks Street City State Zip Code Amount of Each	
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Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starner Jones Mailing Address 136 North Brooks Street City State Zip Code Amount of Each	3000.00 SB17 4208
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Starner Jones Mailing Address 136 North Brooks Street City State Zip Code Amount of Each	
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Mailing Address 136 North Brooks Street City State Zip Code Amount of Each	
Amount of Lacif	15 / Y Y Y Y 2015
	h Disbursement this Period
Pontotoc MS 38863	
Purpose of Disbursement In-kind - Signature Gathering	10000.00
Candidate Name Category/ Type Transaction ID : SE	\$B17.4192
Office Sought: House Disbursement For: 2015 Senate Primary General Other (specify) Special-General State: MS District: 01	

SUBTOTAL of Disbursements This Page (optional).....

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	nedule(s) (d of the	COR LINE NUMBER: PAGE 15 OF 20 check only one) X 17
	y information copied from such Reports and Statements n for commercial purposes, other than using the name and			
\rangle	NAME OF COMMITTEE (In Full) Starner Jones for Congress			
۱.	Full Name (Last, First, Middle Initial) Starner Jones			Date of Disbursement
	Mailing Address 136 North Brooks Street			03 18 2015
	City State Pontotoc MS	Zip Code 38863		Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - Staff Salary			3250.00 Transaction ID : SB17.4101
	Candidate Name		Category/ Type	
	Office Sought: House Senate President State: MS Disbursement Fo Primary Other (s		neral	
3.	Full Name (Last, First, Middle Initial) Starner Jones			Date of Disbursement
	Mailing Address 136 North Brooks Street			03 18 2015
	City State Pontotoc MS	Zip Code 38863		Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - Staff Salary Candidate Name			1750.00 Transaction ID : SB17.4103
		0045	Category/ Type	_
	President Other (s	r: 2015 / General specify) Special-Gel	neral	
	State: MS District: 01 Full Name (Last, First, Middle Initial)			
).	Michael Allen Photography			Date of Disbursement
	Mailing Address 8795 Becca Point			03 D D 7 Y Y Y Y Y 2015
	•	ip Code 38016		Amount of Each Disbursement this Period
	Purpose of Disbursement Event Photography		· · · ·	1100.00
	Candidate Name		Category/ Type	Transaction ID : SB17.4104
	Office Sought: House Disbursement Fo Senate Primary Other (s			
	State: District:			
				6100.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)

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Detailed Summary Page		20a	20	b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.								

TEMIZED	DISBURSEMENTS	for each category Detailed Summar		X 17 18 19a 19b 20a 20b 20c 21				
		rson for the purpose of soliciting contributions to solicit contributions from such committee.						
\	COMMITTEE (In Full) Jones for Congress							
A. Veronica	Last, First, Middle Initial) a Minier ress 157 Deer Park Drive	Date of Disbursement O3 16 2015						
City Thaxton Purpose of I Finance Co Candidate N Office Sough	Int: House Disbursement F Senate Primar	ry General	Category/ Type	Amount of Each Disbursement this Period 1500.00 Transaction ID: SB17.4142				
B. Ross Pu	District: _ast, First, Middle Initial)	(specify)		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Gillsville Purpose of I Field Consu Candidate N Office Sough	lame nt: House Disbursement F Senate Primar		Category/ Type	Amount of Each Disbursement this Period 2000.00 Transaction ID: SB17.4115				
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City Alpharetta Purpose of I Field Consu Candidate N Office Sough	GA Disbursement ulting lame nt: House Disbursement F Senate Prima		Category/ Type	Amount of Each Disbursement this Period 3000.00 Transaction ID: SB17.4113				
	Disbursements This Page (optional)			6500.00				
TOTAL This P	eriod (last page this line number only)			, , ,				

Office Sought:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

House Senate

President

President

District:

Primary

Other (specify)

Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form	-	Use separate sc for each categor Detailed Summa	hedule(s) y of the	FOR LINE NUMBER: (check only one) X 17 18 20a 20b	PAGE 17 OF 20 19a 19b 20c 21
Any information copied from such Repo or for commercial purposes, other than		•	, , ,		· ·
NAME OF COMMITTEE (In Full) Starner Jones for Congre	SS				
Full Name (Last, First, Middle Initial) A. Right Path Strategic Affai	rs			Date of Disbursement	
Mailing Address 3960 Rolling Hills Dr				03 30	2015
City Cumming	State GA	Zip Code 30041		Amount of Each Disb	ursement this Period
Purpose of Disbursement Strategy Consulting			Transaction ID : SB17.4	/	
Candidate Name			Category/ Type		
Office Sought: House	Disbursement For	r:			

	Otate. District.			
	Full Name (Last, First, Middle Initial)			
В.	Southern Research Group			Date of Disbursement
	Mailing Address 4780 N Hwy 55 #400			03 / 0 / 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	City	State Zip Code		Amount of Each Disbursement this Period
	Jackson	MS 39211		Authority of Edon Biobardonicht this Foriod
	Purpose of Disbursement Signature Collection			8100.00 Transaction ID : SB17.4140
	Candidate Name		Category/ Type	Transaction ib . 3617.4140
	Office Sought: Senate President State: District:	Disbursement For: Primary General Other (specify)		
_	Full Name (Last, First, Middle Initial)			
_	Southern Research Group			Date of Disbursement
U.	Country Rossardi. Croup			M M / D D / Y Y Y
	Mailing Address 4780 N Hwy 55 #400			03 20 2015
	City	State Zip Code		Amount of Each Disbursement this Period
	Jackson	MS 39211		
	Purpose of Disbursement Polling			25000.00
	Candidate Name		Category/ Type	Transaction ID : SB17.4144
	Office Sought: House	Disbursement For:		1
	Senate	Primary General		

General

State:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

President

House Senate

District:

President

District:

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 36647

C. Southwest Airlines

Purpose of Disbursement Travel Expense

Candidate Name

Office Sought:

City

Dallas

State:

Image# 15951161337								
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Benorts and Statements in	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 OF 20 (check only one) X 17						
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Starner Jones for Congress								
Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address PO Box 36647		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City State Dallas TX Purpose of Disbursement Travel Expense Candidate Name Office Sought: House Senate Primary President State: District:	General	Amount of Each Disbursement this Period 559.00 Transaction ID : SB17.4160						
Full Name (Last First Middle Initial)								

Full Name (Last, F	irst, Middle Initial)				
3. Southwest A	irlines				Date of Disbursement
Mailing Address F	PO Box 36647				03 30 7 2015
City		State	Zip Code		Amount of Each Disbursement this Period
Dallas		TX	75235		Authority of Edolf Biobardonione this Forloa
Purpose of Disburs Travel Expense	sement				628.00
					Transaction ID : SB17.4161
Candidate Name				Category/ Type	
Office Sought:	House	Disbursement For:			
	Senate	Primary	General		

Other (specify)

Zip Code

General

75235

State

TX

Disbursement For:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Primary

Other (specify)

FE5AN018

Date of Disbursement

Transaction ID: SB17.4162

30

Amount of Each Disbursement this Period

2015

279.50

1466.50

03

Category/ Type

""	1age# 13931101336				
	CHEDULE B (FEC FEMIZED DISBURSE	•	Use separate sc for each categor Detailed Summa	hedule(s) y of the	FOR LINE NUMBER: PAGE 19 OF 20 (check only one) X 17
					erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Fu Starner Jones for Co	II)			
Α.	Full Name (Last, First, Middle Initial) SurgeRed				Date of Disbursement
	Mailing Address 101 N Columbus St Ste 202				03 31 2015
	City State Zip Code Alexandria VA 22314 Purpose of Disbursement				Amount of Each Disbursement this Period 6060.00
	Technology-Telephones Candidate Name			Category/	Transaction ID : SB17.4165
	Office Sought: House Senate Preside	1 H	General	Туре	
_	State: District: Full Name (Last, First, Middle	Initial)			
B.					Date of Disbursement
	City State Zip Code				Amount of Each Disbursement this Period
	Purpose of Disbursement				
	Candidate Name			Category/ Type	
	Office Sought: House Senate Preside	H = 1	General		
	State: District: Full Name (Last, First, Middle Initial)				
C.	•				Date of Disbursement
	Mailing Address				M M / D D / Y Y Y
	City State Zip Code				Amount of Each Disbursement this Period
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	Office Sought: House Senate	· · · · · ·	General	Туре	
	State: Preside	ent Other (s	ьр ес пу)		

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TOTAL This Period (last page this line number only).....

6060.00

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

20

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20

Transaction ID: SC/10.4179 NAME OF COMMITTEE (In Full) Starner Jones for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2015 [PERSONAL FUNDS] Primary Starner Jones General Mailing Address X Other (specify) 136 North Brooks Street Special-General City State ZIP Code MS 38863 Pontotoc Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 200000.00 0.00 200000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 20 2015 0.00 On Demand % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 200000.00 TOTALS This Period (last page in this line only) 200000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.